

Work Order ID 103115

103115

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Item ID: D2940-1 Accept ***N900040100*** Setup Start ***NS1***
Revision ID: Stop ***NS2***
Item Name: Support
Start Date: 6/14/13 Start Qty: 2.00 ***2*** Cust Item ID:
Required Date: 6/17/13 Req'd Qty: 2.00 ***2*** Customer: CU-DAR001
Reference: RMA RA111496 - *RETURN*

Approvals: Process Plan: *W* Date: Tooling: Date: Run Start ***NR1***
QC: Date: SPC (Y/N): Date: Stop ***NR2***

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
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Draw Nbr	Revision Nbr
D2940	C

100		0.00							
100									
QC	Memo	0.00							
Quality Control	INSPECT RA111496								
110		0.00							
110									
Packaging	Memo	0.00							
Packaging	RE-IDENTIFY USING NEW B/N								
120	QC21- Final Inspection - Work Order Release	0.00							
120									
QC	Memo	0.00							
Quality Control									

13-07-10

Picklist Print

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Work Order ID: 103115
Parent Item: D2940-1
Parent Item Name: Support

Start Date: 6/14/13

Required Date: 6/17/13

Start Qty: 2.00

Required Qty: 2.00

Comments: IPP C 02.11.26 Reformat; Added P/OKJ
IPP Rev:D Added priming as per Rev B 07-04-30 JLM
IPP E 08.03.19 Re-format Ec verified by DD
IPP Rev:F 08-10-22 add qc14 DD verified by:EC
rev.C DD verf:EC
IPP Rev:G 11.08.04 as per dwg

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D2940-1 Support		Manufactured	No				Each	36.0000		2			

Location

Loc Qty

Loc Code

LG052

36

100710

20

71829

1

90677

2

93038

1

96803

12

2908

u

RA 111496

Received @ Dart June 10th, 2013
Inspected @ Dart June 12th, 2013

CUSTOMER: OVER SEAS AIRCRAFT SUPPORT
CUSTOMER CONTACT: TAMMY SCOTT
SHIPPED FROM: LAKESIDE AZ, USA

Instructions for RA 111496

- D2893-1 B96348 qty x2 are in good condition
- Return to stock under new Batch #
- D2940-1 B79118 qty x2 are in good condition
- Return to stock under new Batch #

Time Estimate = 1 HOUR ONLY (stores)

Departments Required: Stores (restocking)

Pictures Attached = NO

QTY INSPECTED = x2 D2893-1 B96348
x2 D2940-1 B79118

**THIS INSTRUCTION SHEET MUST
BE ATTACHED TO THE
RESTOCKING WORK ORDER AT
ALL TIMES!!!!**

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
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Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other
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DART AEROSPACE

1270 Aberdeen Street
Hawkebury, Ontario K6A 1K7

RETURN AUTHORIZATION

Date: 1-Mar-13
 Customer Name: OVERSEAS A/C SUPPORT
 Customer Code: OVER01 (Sales: COVER01)
 Telephone No: 1 928 368 6565
 E-mail Address: t.scott@oasinc.aero
 Contact Name: TAMMY SCOTT
 Issued by: Lisa McMachen

DART RA Number: RA111496

DHS RA Number: DSIRA-01252

DHS PO #: PO4702

DART Invoice #: INV110860

Customer Ref: 18919

PAR/CAR/NCR/SQ: N/A

Quantity	Part Number	Description	Batch Number
2	D2893-1	SUPPORT	B96348
2	D2940-1	SUPPORT	B79118

Reason for Return: CUSTOMER ORDERED THE WRONG PART - BY
 LOOKING IN THE CATALOGUE - BELIEVED THEY ORDERED THE CORRECT PARTS

Credit Instructions:

☒ Full credit
☐ None

Return Instructions: Commercial Invoice Yes ☒
 Documentation (STC/ARC/ICA) Yes ☐
 Packing Slip Yes ☐

Include on Commercial Invoice:
 Part Number/Description / Value in USD
 Parts are aircraft parts / return to Manufacturer

Shipping Instructions: Prepaid YES Collect _____ Courier _____
 Account# _____

RECEIVING RETURN AUTHORIZATION

RECEIVING RETURN AUTHORIZATION						
Receiver: <i>PS</i>	Condition of Packaging: <i>CND</i>			Paperwork:	P/L	Photograph Required
Date: <i>13/6/14</i>	Freight Company: <i>VPO</i>			RA	NONE	Yes No
Quantity	Part Number	Batch	QC Verification	CHG #	W/O#	Disposition
<i>02893-1</i>	<i>B 96348</i>				<i>103114</i>	
<i>02940-1</i>	<i>B 79118</i>				<i>103115</i>	

QC Inspector: _____ Photograph Attached: Yes No Sealed Complete Short H/W Short Kit No P/W Damaged
 Date: _____ Condition: _____

QC Comments: _____ Special Return/Rework Instructions: _____

Issue Credit: Yes No

GM Approval: *[Signature]*Date: *JUNE 13 2015*

Invoice Amount: \$4,547.62

Restocking Fee: *- 378.55*Freight: *#4169.07*Net Credit: *#4169.07*

Quality Assurance:

Close Date: